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|--|-----------------------------|-------------------------------|-----------------|
| <h2 style="margin: 0;">TRANSMITTAL<br/>FORM</h2> <p style="font-size: small; margin-top: 10px;">(to be used for all correspondence after initial filing)</p> | <b>Application Number</b>   | 10/599,159-Conf. #5116        |                 |
|  | <b>Filing Date</b>          | September 21, 2006            |                 |
|  | <b>First Named Inventor</b> | Larry R. Krepski              |                 |
|  | <b>Art Unit</b>             | 1625                          |                 |
|  | <b>Examiner Name</b>        | Rita J. Desai                 |                 |
| <b>Total Number of Pages in This Submission</b>  | 26                          | <b>Attorney Docket Number</b> | C1271.70044US02 |

| ENCLOSURES (Check all that apply)  |  |  |
|--|--|--|
| <input type="checkbox"/> Fee Transmittal Form<br><br><input type="checkbox"/> Fee Attached<br><br><input checked="" type="checkbox"/> Amendment/Reply<br><br><input type="checkbox"/> After Final<br><br><input type="checkbox"/> Affidavits/declaration(s)<br><br><input type="checkbox"/> Extension of Time Request<br><br><input type="checkbox"/> Express Abandonment Request<br><br><input type="checkbox"/> Information Disclosure Statement<br><br><input type="checkbox"/> Certified Copy of Priority Document(s)<br><br><input type="checkbox"/> Reply to Missing Parts/Incomplete Application<br><br><input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Drawing(s)<br><br><input type="checkbox"/> Licensing-related Papers<br><br><input type="checkbox"/> Petition<br><br><input type="checkbox"/> Petition to Convert to a Provisional Application<br><br><input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address<br><br><input type="checkbox"/> Terminal Disclaimer<br><br><input type="checkbox"/> Request for Refund<br><br><input type="checkbox"/> CD, Number of CD(s) _____<br><br><input type="checkbox"/> Landscape Table on CD | <input type="checkbox"/> After Allowance Communication to TC<br><br><input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences<br><br><input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)<br><br><input type="checkbox"/> Proprietary Information<br><br><input type="checkbox"/> Status Letter<br><br><input type="checkbox"/> Other Enclosure(s) (please identify below): |
| <div style="border: 1px solid black; display: inline-block; width: 150px; height: 20px; margin-top: 5px;"></div> Remarks   |  |  |

| SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT |                                |          |        |
|--|--------------------------------|----------|--------|
| Firm Name                                  | WOLF, GREENFIELD & SACKS, P.C. |          |        |
| Signature                                  | /C. Hunter Baker/              |          |        |
| Printed name                               | C. Hunter Baker, M.D., Ph.D.   |          |        |
| Date                                       | February 8, 2010               | Reg. No. | 46,533 |

| Certificate of Electronic Filing Under 37 CFR 1.8  |   |
|--|---|
| I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being transmitted via the Office electronic filing system in accordance with § 1.6(a)(4). |   |
| Dated: February 8, 2010  | Electronic Signature for Daniel S. Peters: /Daniel S. Peters/ |